

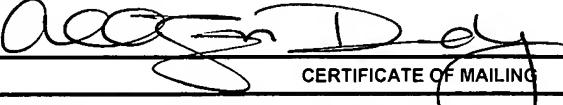
TRANSMITTAL FORM 		Attorney Docket No.	2100/24
		Application Number	10/090,685
		Filing Date	March 5, 2002
		First Named Inventor	Alfred THOMAS
		Group Art Unit	3711
		Examiner	Mendiratta

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Amendment / Response to Restriction/Election Req. <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Status Letter <input type="checkbox"/> Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-0930. A duplicate copy of this sheet is enclosed.	

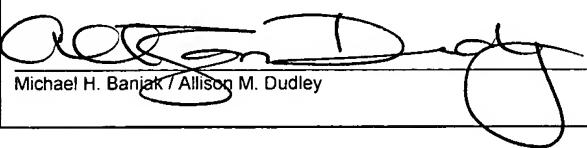
CALCULATION OF FEE

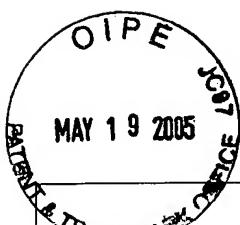
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Small Entity		Large Entity	
					Rate	Add'l Fee		
Total		Minus		0	x \$9=	0	x \$18=	
Indep.		Minus		0	x \$42=	0	x \$84=	
First Presentation of Multiple Dep. Claim					+\$140=	---	+\$280=	
					total add'l fee	\$ 0	total add'l fee	\$ 0

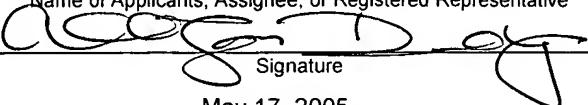
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael H. Baniak, Reg. No. 30,608 Allison M. Dudley Reg. No. 50,545 Attorneys for Applicant(s) BANIAK PINE & GANNON 150 N. Wacker Drive, Suite 1200 Chicago, Illinois 60606		
Signature			Date: May 17, 2005

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on: May 17, 2005		
Signature	 Michael H. Baniak / Allison M. Dudley	Date: May 17, 2005



Certificate of First Class Mailing	
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on May 17, 2005.	
Michael H. Baniak / Allison M. Dudley Name of Applicants, Assignee, or Registered Representative	
	
Signature	
May 17, 2005 Date of Signature	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl No. : 10/090,685
Applicant(s) : Alfred THOMAS,
: Duncan F. BROWN,
: Lawrence E. DeMar, and
: Scott D. SLOMIANY
Filed : March 5, 2002
TC/A.U. : 3711
Examiner : Vishu K. Mendiratta
Docket No. : 2100/24
Title : SPIN KENO

Confirmation No. 8496

RESPONSE

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is responsive to the Examiner's Office Action of February 17, 2005. Please reconsider the rejection of the claims in view of this Response and the following Remarks.